

## PART B - FEE(S) TRANSMITTAL

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22852 7590 01/10/2007

**FINNEGAN, HENDERSON, FARABOW, GARRETT & DUNNER LLP**  
**901 NEW YORK AVENUE, NW**  
**WASHINGTON, DC 20001-4413**

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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/664,038	09/17/2003	Penelope Mavromara	03495-0194-01	3906

**TITLE OF INVENTION: NUCLEIC ACIDS AND NEW POLYPEPTIDES ASSOCIATED WITH AND/OR OVERLAPPING WITH HEPATITIS C VIRUS CORE GENE PRODUCTS**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	04/10/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS			04/10/2007 DEMMANU2 000000037 10664038	
KETTER, JAMES S	1636	530-388300		01 FC:1501 02 FC:1504	1400.00 OP 300.00 OP	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list					
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				1 Finnegan, Henderson	
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				2 Farabow, Garrett &	
					3 Dunner, L.L.P.	

### 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

#### (A) NAME OF ASSIGNEE

Institut Pasteur  
Hellenic Pasteur Institute

#### (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Paris, France  
Athens, Greece

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

#### 4a. The following fee(s) are submitted:

Issue Fee  
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 06-0916 (enclose an extra copy of this form).

#### 5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Typed or printed name

Mary Rucker Henninger

Date April 9, 2007

Registration No. 56,992

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